

QUALITY & PERFORMANCE REPORT

NHS HULL CCG BOARD

JUNE 2022

TABLE OF CONTENTS

Page

Executive Summary	4
Financial Position	5
CCG Constitutional Indicators	
Performance Indicator Exceptions	7
Quality Indicator Exceptions	14

SECTION ONE

CORPORATE PERFORMANCE REPORT

Executive Summary

Financial Summary

The CCG's draft (unaudited) annual accounts show that it achieved a £106k surplus against the in-year allocation. There is therefore a minimal impact on the CCG's historic surplus, increasing it from £15.402m to £15.508m. This is in line with the financial plan submitted to NHS England.

Performance

The April position has been updated after the Q&P Committee meeting held on 17 June 2022.

HUTHT Type 1 A&E 4 hour waiting time performance for April showed a slight improvement but continues to underperform, at 49.21%. Activity levels decreased during April 2022 to 9,559 from 9,705 in March 2022.

Referral to Treatment 18 weeks waiting times performance at HUTHT reported 56.90% in April 2022 with the total waiting list increased to 66,370 in April from 64,935 in March 2022.

Hull CCG Diagnostic test 6-week waiting times deteriorated in April 2022 with current performance of 36.00% from 31.45% in March 2022.

Hull CCG 62-day cancer waiting times performance showed improvement in April 2022. Performance was 100% with 0 patient breaches.

Safety, Quality and Patient Experience

Hull University Teaching Hospitals NHS Trust (HUTHT)

The Trust continue to be in a period of Enhanced Surveillance, following the commencement of the Quality and Risk Profile (QRP) process, led by NHS Hull CCG. As part of the 104 weeks wait reduction for patients, HUTHT is working with wider health partners across the system to ensure patients are cared for as quickly as possible.

With the reduction of COVID restrictions, assurance visits have taken place with the CCG and NHS England. The Infection Prevention (IPC) follow up visit was positive, and improvements have been actioned. The review of Midwifery found progress had been made against the Ockenden standards, there are further actions around audits to be undertaken. Staff were found to be knowledgeable about quality, patient safety and were able to demonstrate the actions being taken to improve services.

Humber NHS Foundation Trust

The Trust have developed a competency framework currently being piloted. The framework sets out a structure for all roles throughout the organisation and makes sure everyone has the correct level of knowledge and skills. Positive feedback has been received from the pilot areas. The plan is to further develop the framework and roll out to other areas of the Trust.

The waiting lists for CAMHS are continuing to reduce. Improvement is noted and the IAPT Team who are maintaining their 18-week position. The Trust are working to maintain this position in line with the recovery plan.

City Health Care Partnership (CHCP)

Transfer of Care CHCP continue to work collaborative with HUTHT in a quality improvement programme led by NHS Hull CCG. This includes reviewing the electronic communication systems (Lorenzo) and information systems for cardiac patients. The aim of this work is to improve the information being received between organisations and in the transfer of care for patients. The learning from this will support the system and may be transferable for other patient groups.

Yorkshire Ambulance Service (YAS)

Nationally and locally there continues to be significant pressure within 999 and NHS 111 services. Ongoing recruitment and training are taking place to support this.

Financial Position

Achievement of Financial Duties / Plans

Based on the unaudited information available up to the 31st March 2022. Achievement against the financial performance targets for 2021/22 are as follows

<i>Performance Assessment</i>	
Not exceed Revenue Resource Limit	Green
Running Costs Envelope	Green
<u>Other relevant duties/plans</u>	
Not exceed Cash Limit	Green
Variance to planned Surplus	Green

Financial Performance / Forecast				
	Full Year (000's)			Risk
	Budget	FOT	Var	
20/21 Core Allocation	713,471	713,471	-	
Surplus			-	
Acute Services	413,579	413,189	390	Green
Prescribing & Primary Care Services	113,592	113,794	(202)	Green
Community Services	63,039	62,648	391	Green
Mental Health & LD	71,887	73,291	(1,404)	Amber
Continuing Care	27,481	26,538	943	Green
Other Including Earmarked Reserves	18,876	18,999	(123)	Green
Running Costs	5,016	4,906	110	Green
TOTAL EXPENDITURE	713,471	713,364	106	
Under/(over)-spend against in year allocation	-	106	106	Green

KEY:

RED = negative variance of £2M or above

AMBER = negative variance between £500k - £2M

GREEN = positive variance or negative variance less than £500k

Exception: Other including earmarked reserves

Summary Financial Position as of 31 March 2022.

The CCG's draft (unaudited) annual accounts show that it achieved a £106k surplus against the in-year allocation. There is therefore a minimal impact on the CCG's historic surplus, increasing it from £15.402m to £15.508m. This is in line with the financial plan submitted to NHS England.

The running cost allocation was £5,684k. The expenditure against this allocation was £4,906km therefore achieving the requirement to remain within the allocation.

Variances to note include an underspend on Spire Healthcare which was largely offset by increases in costs with Spa Medica. Both costs fall within the calculations used for elective recovery funding. Out of area mental health costs were significantly over budget (£2.6m) due to increases in both the volume and cost of packages of care. Continuing Healthcare charges show as an underspend of £943k due to the accrual in 20/21 being more than the associated charges that were received in 21/22.

Statement of Financial Position

At the end of March, the CCG was showing £36.2m excess of liabilities over assets. This is expected for an NHS commissioning organisation and is in line with the previous financial year.

Revenue Resource Limit

The Revenue Resource Limit for the CCG is £728,873k for both 'Programme' and 'Running' costs. This includes the historic surplus of £15,402k. This is significantly higher than in previous years due to the level of system funding flowing through the CCG.

Working Balance Management

Cash

The closing cash for February was £10k. As in 2020/21 there is no requirement to manage cash to minimal levels, however the CCG is not retaining excess amounts of cash.

Better Payment Practice Code:

Target 95% payment within 30 days

a. Non NHS

For payments to Non NHS suppliers the performance for March was 97.47% on the value and 95.84% on the number of invoices, whilst the full year position is 95.12% achievement on the value and 95.82% on number.

b. NHS

For payments to NHS suppliers the performance for March was 100.00% on the value and 100.00% on the number of invoices, whilst the full year position is 99.95% achievement on the value and 96.64% on number.

CCG Constitutional Exceptions

Performance Indicator Exceptions

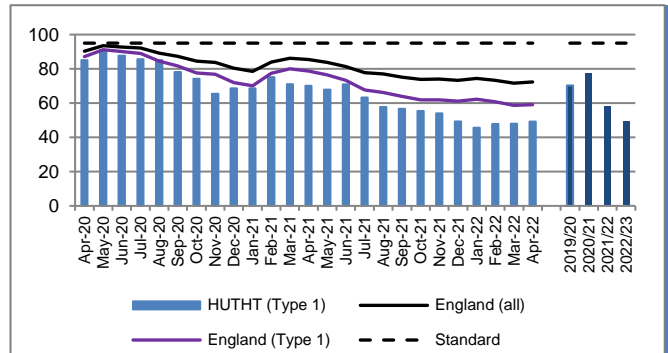
A&E waiting times – percentage of patients spending less than 4 hours total time in the A&E department (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
HUTHT Actual	70.03	77.61	57.92	47.99	49.21	49.21
Status						
National Target	95.00	95.00	95.00	95.00	95.00	95.00
Status						



*Due to changes in data and for consistency, A&E activity and performance is now using Provider Sitrep data.

HUTHT Type 1 A&E 4 hour waiting time performance for April showed a slight improvement but continues to underperform, at 49.21%.

In April 2022 the Trust reported 9,559 A&E attendances and 4,704 breaches.

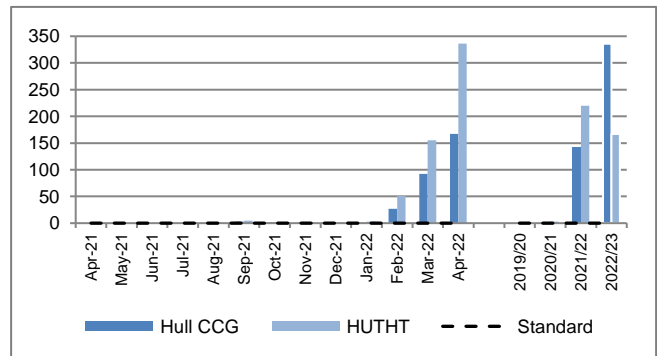
A&E waiting times – Number of patients spending more than 12 hours total time in the A&E department (Trolley waits)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
HUTHT Actual	0	3	220*	155	336	336
Status						
Hull CCG Actual	0	1	142	92	167	167
National Target	0	0	0	0	0	0
Status						



Hull CCG reported 167 trolley breaches in April 2022.

*December 2021 data was reported to NHSE incorrectly as 2 breaches. HUTHT have confirmed this should have been 1 breach which was not a Hull CCG patient.

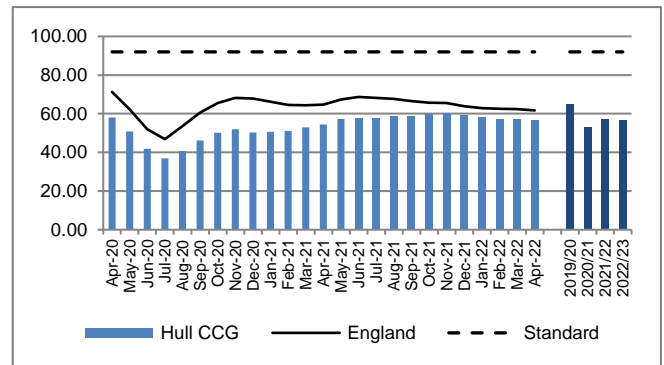
Referral to Treatment incomplete pathways: percentage of incomplete pathways within 18 weeks (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
HUTHT Actual	65.36	52.11	57.25	57.25	56.94	56.94
Status						
Hull CCG Actual	65.18	52.99	57.03	57.03	56.90	56.90
National Target	92.00	92.00	92.00	92.00	92.00	92.00
Status						



Referral to Treatment 18 week waiting times performance has been consistent over the year and shows an overall improvement in 2021/22 when compared to 2020/21.

Hull CCG position for April 2022 was 56.90%, a reduction from the March 2022 position of 57.03%.

[Statistics » Consultant-led Referral to Treatment Waiting Times Data 2022-23 \(england.nhs.uk\)](#)

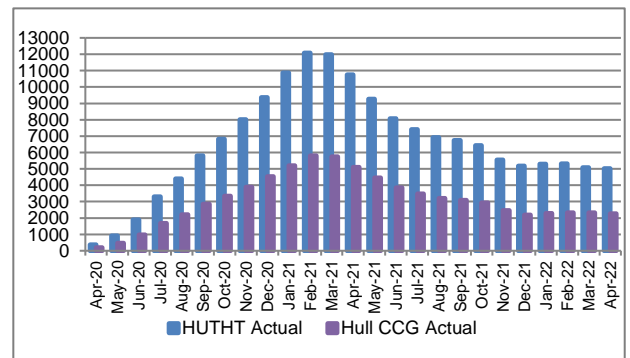
Number of >52-week Referral to Treatment in Incomplete Pathways

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
HUTHT Actual	86	11,991	5,077	5,077	5,032	5,032
Status						
Hull CCG Actual	47	5,571	2,321	2,321	2,259	2,259
National Target	0	0	0	0	0	0
Status						



Hull CCG reported 2,259 patients waiting over 52+ weeks at the end of April 2022. A reduction of 62 patients when compared to March 2022.

In April 2022 the Trust had 5,032 patients waiting over 52+ weeks, a reduction of 45 patients when compared to the previous month of 5,077.

Most breaches relate to Ear, Nose and Throat (ENT), General Surgery, Plastic Surgery, Gynaecology and Other – Surgical Services.

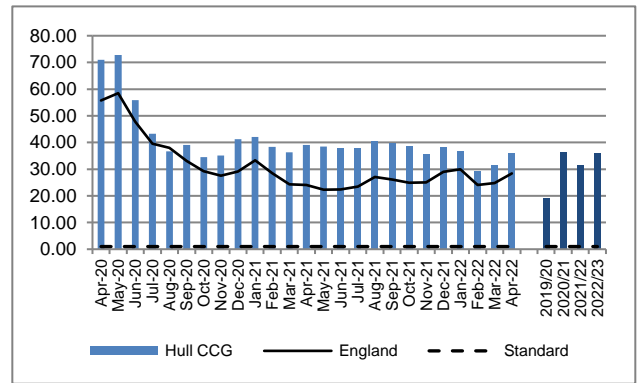
Diagnostic test waiting times (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
HUTHT Actual	20.26	37.02	32.96	32.96	36.75	36.75
HUTHT Status						
Hull CCG Actual	19.16	36.33	31.45	31.45	36.00	36.00
Status						
National Target	1.00	1.00	1.00	1.00	1.00	1.00



Hull CCG performance showed no improvement in April 2022 when compared to the previous month, reporting 36.00% of patients waiting longer than 6 weeks compared to 31.45% in March 2022.

The CCG reported 2,452 breaches during April 2022, 37% (900) of the total breaches were Endoscopy, with Colonoscopy (359) and Gastroscopy (300) combined accounting for 73% of the total Endoscopy breaches.

[Statistics » Monthly Diagnostic Waiting Times and Activity \(england.nhs.uk\)](https://www.england.nhs.uk/statistics/monthly-diagnostic-waiting-times-and-activity/)

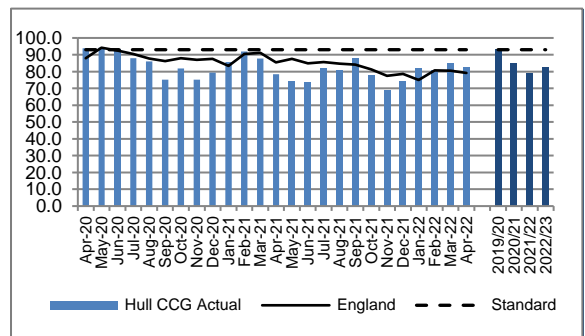
Maximum 2 week wait (%) for first outpatient appointment when referred urgently by GP with suspected cancer

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
Hull CCG Actual	93.09	84.82	78.70	85.01	82.47	82.47
National Target	93.00	93.00	93.00	93.00	93.00	93.00
Status						
Total Seen	9,861	8,656	10,589	994	662	662
Breaches	681	1,314	2,255	149	116	116



April 2022 performance was 82.47% for Hull CCG with 662 patients seen and 116 breaches. 70 (60%) breaches were due to inadequate out-patient capacity, 41 breaches were due to patient choice and 5 breaches due to clinic cancellation.

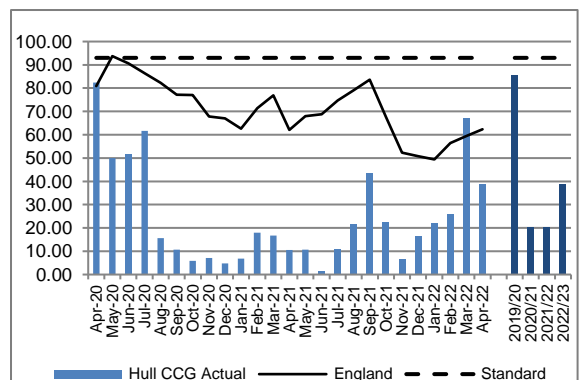
Maximum 2 week wait (%) for first outpatient appointment when referred urgently with breast symptoms

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
Hull CCG Actual	85.54	20.35	20.52	67.02	38.98	38.98
National Target	93.00	93.00	93.00	93.00	93.00	93.00
Status						
Total Seen	1,604	850	1,155	94	59	59
Breaches	232	677	918	63	36	36



April 2022 performance was 38.98% for Hull CCG with 59 patients seen and 36 breaches. 17 (47%) of the breaches were due to clinic cancellation, 11 of the breaches were due to inadequate outpatient capacity and 8 breaches were due to patient choice.

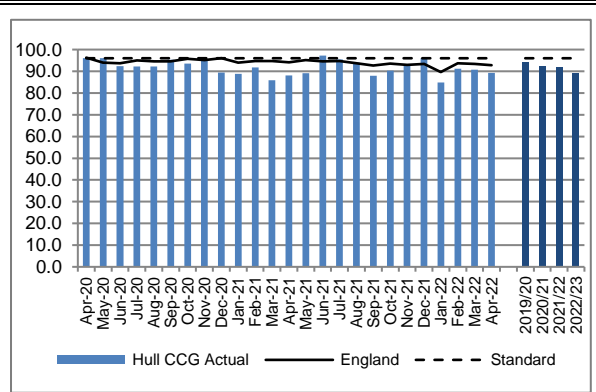
Cancer 31 day waits: Diagnosis to first definitive treatment within 31 days (all cancers) (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			2022/23 In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	94.25	92.16	91.71	90.76	89.18
National Target	96.00	96.00	96.00	96.00	96.00	96.00
Status						
Breaches	87	99	125	11	12	12



April 2022 performance reported 89.18% against the 96% target. 11 patients were seen with 12 breaches of the 31-day standard: 4 breaches due to health care provider-initiated delay, 3 breaches due to inadequate elective capacity, 3 breaches due to treatment delayed for medical reasons, and 2 breaches due to patient choice.

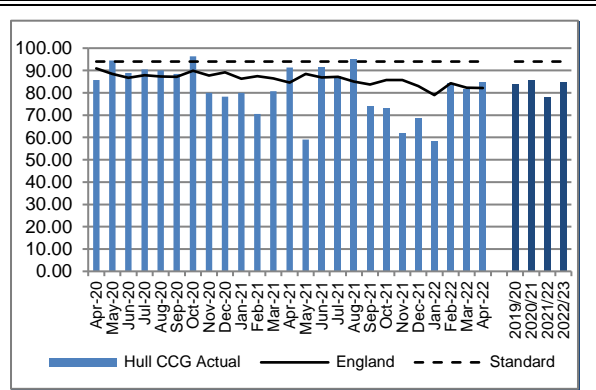
Cancer 31 day waits: 31 day wait for subsequent treatment - surgery (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			2022/23 In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	83.76	85.60	77.87	81.82	85.00
National Target	94.00	94.00	94.00	94.00	94.00	94.00
Status						
Breaches	44	36	56	4	3	3



Performance in April 2022 reported 85% (20 patients were seen with 3 breaches of the standard). Of the breaches, 2 were due to inadequate elective capacity with a wait time of 41 and 58 days and the remaining breach was due to treatment being delayed for medical reasons with a wait of 164 days.

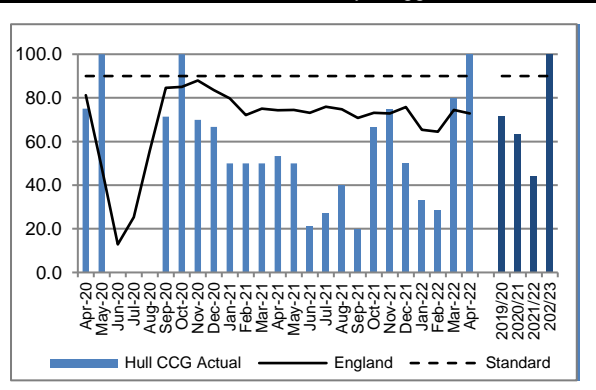
Cancer 62 day waits: first definitive treatment for cancer within 62-days of referral from an NHS Cancer Screening Service (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	71.68	63.53	44.32	80.00	100.00
National Target	90.00	90.00	90.00	90.00	90.00	90.00
Status						
Breaches	32	31	49	2	0	0



The Hull CCG performance for April 2022 was 100% with all 3 patients being seen within 62 days, an improvement when compared to 80% reported in March 2022.

[Statistics » Monthly Commissioner Based Data and Summaries \(england.nhs.uk\)](https://www.england.nhs.uk/statistics/monthly-commissioner-based-data-and-summaries/)

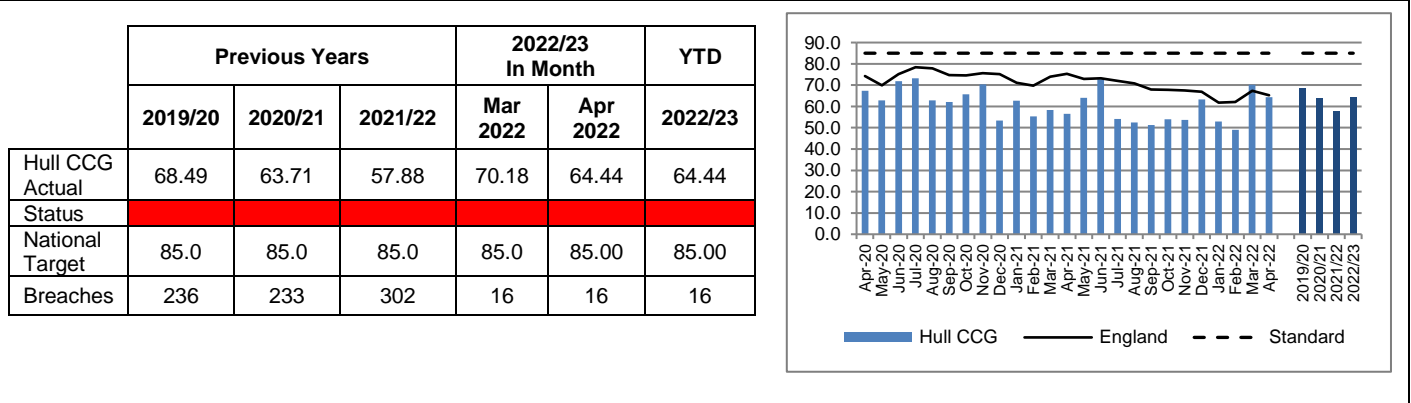
Note: Access to cancer reporting data nationally has changed and become more challenging. The CCG is increasingly dependent on providers supplying information to explain breaches of waiting time standards.

Cancer 62 day waits: first definitive treatments following urgent GP referral for suspected cancer including 31 day rare cancers (%)

Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better



Hull CCG performance in April 2022 reported 45 patients seen with 16 breaches of the standard. Breaches are summarised below:

Breach Reason	Number of Breaches	Tumour Type	Wait (Days)
Complex diagnostic pathways (many, or complex, diagnostic tests required)	8	Lower Gastrointestinal x4 Breast x2 Upper Gastrointestinal x1 Urological (excluding Testicular) x1	Between 76 & 124 days 64 and 85 days 98 days 108 days
Health care provider-initiated delay to diagnostic test or treatment planning	5	Lower Gastrointestinal x3 Upper Gastrointestinal x1 Haematological (excluding Acute Leukaemia) x1	Between 68 and 98 days 77 days 161 days
Elective capacity inadequate (patient unable to be scheduled for treatment within standard time) for treatment in an admitted care setting	2	Urological (excluding Testicular) x2	68 and 87 days
Patient Initiated (choice) delay to diagnostic test or treatment planning, advance notice given	1	Head & Neck x1	81 days

Ambulance clinical quality – Category 1 mean response time (mins)

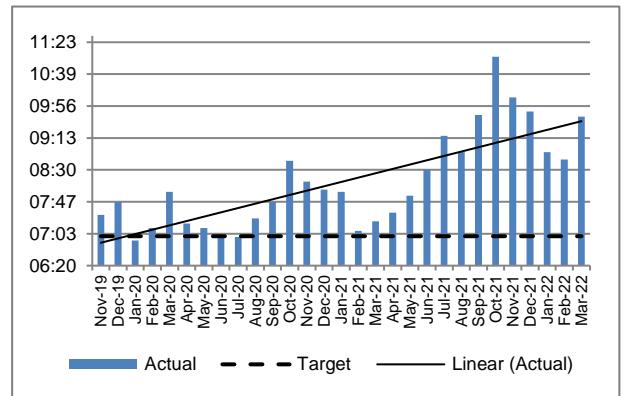
Lead Commissioner: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			2022/23 In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
YAS Actual	07:12	07:37	09:15	09:42	TBC*	TBC*
YAS Target	07:00	07:00	07:00	07:00	07:00	07:00
Status						

*Due to technical issues at YAS, updated positions for April are currently unavailable



Ambulance handover and Crew Clear delays are monitored against zero-tolerance targets and reported at provider level.

% of people entering treatment (%) - Improving Access to Psychological Therapies (IAPT)

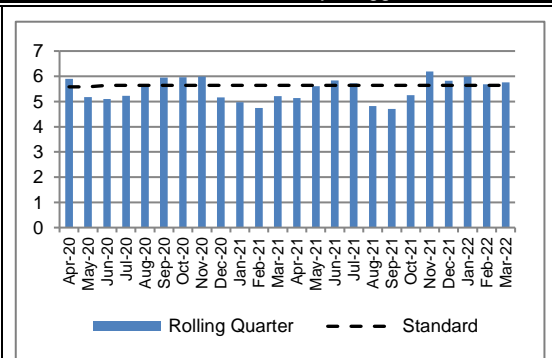
Lead: Karen Ellis

Quality Lead: Deborah Lowe

Polarity: Bigger is better

	Previous Years			In Month			Rolling Qtr
	2019/20	2020/21	2021/22	Jan 2022	Feb 2022	Mar 2022	
Hull CCG Actual	23.05	21.42	22.11	2.34	1.83	1.59	5.76*
National Target	19.89	22.50	22.51	1.88	1.88	1.88	5.64
Status							

* 'Rolling Quarter' covers 3-month interval, January 2022 – March 2022. The national target is for achievement of a 'rolling quarter'.



The overall rolling quarter position against the national target was achieved. The indicator continues to be monitored by NHS England and the CCG.

Note: latest reporting data is March 2022.

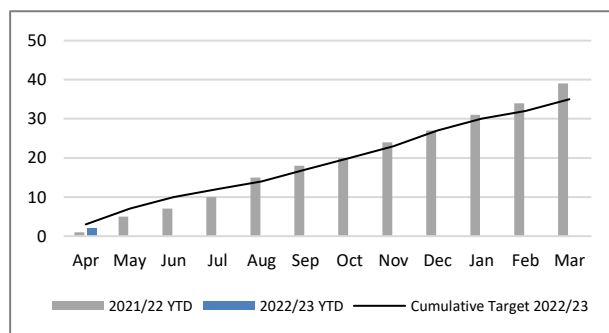
Quality Indicator Exceptions

Incidence of healthcare associated infection (HCAI): Clostridium difficile (C.difficile)

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	50	45	39	5	2
Target	56	56	43	3	3	3
Status						



In April 2022 the CCG reported 2 cases of C.difficile YTD, 1 more when compared to the previous year (Apr-21 reported 1 case YTD).

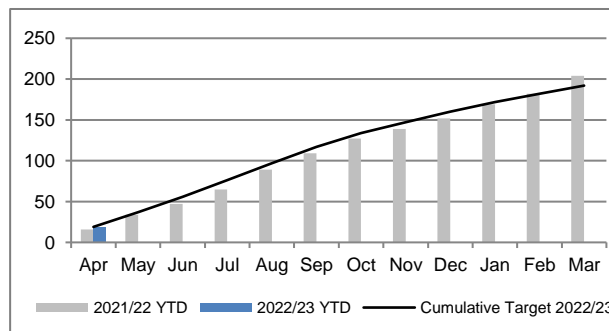
The CCG are currently 33 cases below the annual target of 35.

Incidence of healthcare associated infection (HCAI): E-Coli

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
Hull CCG Actual	250	195	204	22	19	19
Target	211	211	248	20	19	19
Status						



In April 2022 the CCG reported 19 cases of E. Coli, 3 more when compared to April 2021 of 16 cases.

The CCG are currently 173 cases below the annual target of 192.

Incidence of healthcare associated infection (HCAI): Methicillin-Resistant Staphylococcus Aureus (MRSA)

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month						YTD
	2019/20	2020/21	2021/22	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022	Apr 2022	2022/23
Hull CCG Actual	2	1	4	0	1	1	0	1	1	1
Target	0	0	0	0	0	0	0	0	0	0
Status										

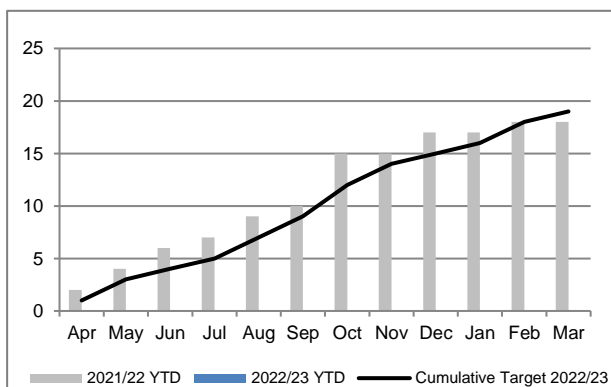
In April 2022 the CCG reported 1 case of MRSA YTD, 1 more than reported in April 21.

Incidence of healthcare associated infection (HCAI): Pseudomonas

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	26	20	18	0	0
Target			24	1	1	1
Status						



In April 2022 the CCG did not report any cases of Pseudomonas whereas 2 cases were reporting in April 21.

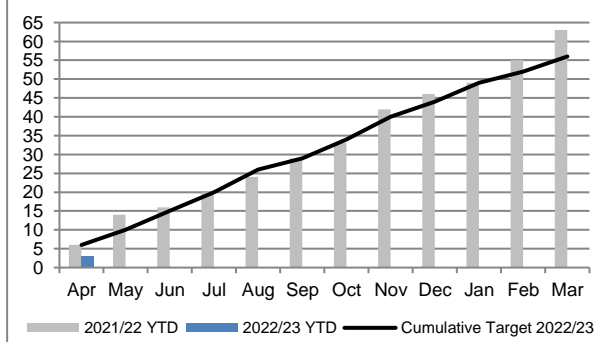
The CCG are currently 19 cases below the annual target of 19.

Incidence of healthcare associated infection (HCAI): Klebsiella

Lead: Deborah Lowe

Polarity: Smaller is better

	Previous Years			In Month		YTD
	2019/20	2020/21	2021/22	Mar 2022	Apr 2022	2022/23
	Hull CCG Actual	52	45	63	8	3
Target			47	4	6	6
Status						



In April 2022 the CCG reported 3 cases of Klebsiella YTD, 3 fewer when compared to the previous year (Apr-21 reported 6 cases YTD).

The CCG are currently 53 cases below the annual target of 56.